MEASURING SUCCESS: Performance Metrics

HUD Level Measures	CoC Program Measures	ESG Program Measures	CoC Coordination Measures
Key National Metrics of High Performing Communities	*HUD and local participant measures of program effectiveness*	*State and local participant measures of program effectiveness*	*Local agency level measures of MDHA coordination and collaboration efforts*
-Number of Homeless Point In Time Count (PIT) and Annual Homeless Assessment Report (AHAR) including	-Occupancy Rates	-Exits to Permanent Housing	-Completion of Goals and Action Items within the CoC Strategic Work Plan
-Reduction in Chronic and Veteran Homelessness	-Exits to Permanent Housing	-Housing Stability in Rapid Rehousing	-Reduction in ER Use
-Recidivism Rate of returns to the homeless system of care	-Enrollments in Main Stream Cash and Non Cash Benefits	-Enrollments in Main Stream Cash and Non Cash Benefits	-Reduction in Incarcerations
-Length of Stay in emergency shelter and homeless system of care	-Household Income	-Household Income	-Housing Utilization Rates
	-Housing Stability in Rapid Rehousing and Permanent Supportive Housing		-Reduction in staffing turnover
			-Increase in Supply of PSH
			-CEU hours achieved by Case Managers

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MDHA
METRO DALLAS HOMELESS ALLIANCE

Continuum of Care Strategic Work Plan

Building an Effective Homeless Response System

The Continuum of Care (CoC) manages the community's response to the experience and risk of homelessness in Dallas and Collin Counties. The US Department of Housing and Urban Development establishes the basic guidelines of this planning process within the Code of Federal Regulations in 24 CFR part 578.1. The CoC's core duties are to:

- Promote community-wide commitment to the goal of ending homelessness;
- Provide funding for efforts by nonprofit providers, states and local governments to re-house homeless individuals and families rapidly while minimizing the trauma and dislocation caused to homeless individuals, families, and communities as a consequence of homelessness;
- Promote access to and effective use of mainstream programs by homeless individuals and families; and
- Optimize self-sufficiency among individuals and families experiencing homelessness.

This Continuum of Care Strategic Work Plan is developed to effectively organize and utilize resources in a goal oriented, performance based, action plan that is to be carried out by the Metro Dallas Homeless Alliance, advised by the membership and committees of the Continuum of Care Assembly, and lead by the MDHA Board of Directors.

CoC Strategic Work Plan Development Timeline:

May 19, 2015: MDHA presents second draft of the CoC SWP to funders and Board of Directors

May 20, 2015: MDHA presents second draft of the CoC SWP at the State of the Homeless Address

May 26, 2015: CoC Assembly makes final recommendations and endorses the CoCSWP

May 28, 2015: MDHA Board of Directors makes final recommendations and approves the CoCSWP

June 1, 2015: MDHA begins implementation of the CoCSWP and incorporates action items into the CoC Program Grant

September 15, 2015: MDHA produces first CoC SWP Quarterly Performance Report

OBJECTIVE 1: Increase Progress to End Chronic Homelessness

Goal 1: Increase the supply of Permanent Supportive Housing	Goal 2: Develop Client Prioritization system for PSH Supply	Goal 3: Increase Success in Housing First model	Goal 4: Improve access to health and behavior health resources
-Conduct an RFA for new PSH in the FY2015CoC Program Cycle -Aggressively implement the 2013-2016 Dallas Area Plan for PSH -Update PSH Housing Development Market Analysis	-Adopt CoC Policy and Procedures based on HUD CPD Notice14-012 on prioritizing PSH beds -Develop system for documenting homelessness and disability within HMIS -Develop centralized housing wait list across the CoC.	-Conduct best practice trainings for PSH Agencies -Review all PSH programs' eligibility, application and intake policies and procedures to improve housing first approach -Develop standard reporting mechanism to measure compliance with 85% PSH for Chronic Homeless commitments by CoC programs	-Develop Health Navigators to serve unsheltered and emergency sheltered populations -Review VI-SPDAT, ANSA and substance abuse assessment tools -Provide ACA Navigator Training

OBJECTIVE 2: Increase Housing Placement and Stability

Goal 1: Increase opportunities for best practices training among housing case managers	Goal 2: Increase Housing Placement capacity at emergency shelters	Goal 3: Have access to real-time housing vacancies and opportunities	Goal 4: Increase pool of private landlords willing to take higher risk clients
-Develop monthly Case Manager trainings on topics to improve client stability -Develop speaker series from thought leaders on homelessness -Incentivize agencies to increase training opportunities for staff -Establish T3 Training Program Series TIC, MI and Harm	- Create a centralized flexible fund of last resort to cover: housing deposit, critical documents, transportation related costs, etc. -Conduct process improvement analysis of housing matriculation for all PSH programs -Create Critical Documents web resource and clerk position	-Expand Homebase website and identify 'friendly' landlords database -Develop PCCI/IRIS/PLEXUS housing and services referral capacity -Train agencies on ALN multi-family housing database search	-Collaborate with DHA on landlord recruitment -Create Landlord Engagement taskforce

OBJECTIVE 3: Increase Household Employment and Benefit Income

Goal 1: Implement application process for Texas Benefits at program intake	Goal 2: Increase access to SSI/SSDI and SOAR applications	Goal 3: Expand employment opportunities for reentry populations	Goal 4: Improve access to Workforce Solutions resources
-Train agencies on Texas Community Partner Program -Develop incentives for agency certification in the Texas Community Partner Program	- Create SOAR Steering Committee to provide peer to peer SOAR training and support -Create CoC / ESG scoring incentives for SOAR implementation -Develop information sharing agreements between health care organizations and homeless service providers	-Advocate for 'Ban the Box' employers -Develop a job fair targeted specifically to reentry populations	-Provide Unemployment Insurance training to Case Managers

OBJECTIVE 4: Increase Rapid Rehousing to End Family Homelessness

Goal 1: Increase agency capacity on Rapid Rehousing model	Goal 2: Increase Supportive Services resources to assure family stability in RRH	Goal 3: Quickly Identify families at imminent risk of homelessness	Goal 4: Increase availability and access to quality affordable child care
-Create a RRH Learning Collaborative among CoC and ESG programs -Develop a real-time housing inventory database. -Develop a Family Track within the Coordinated Access System	-Develop continual performance and experience metrics for existing ESG and RRH programs -Develop property/site based supports for case management through master lease-type agreements between agencies and property owners	-Develop Coordinated Assessment Homeless Hotline	-Identify Child Care resources

OBJECTIVE 5: Improve Coordination, Collaboration & Partnerships

Goal 1: Reduce ER and Jail recidivism rates by persons experiencing homelessness	Goal 2: Improve coordination and resources for unsheltered homeless in large encampments	Goal 3: Recognize and support excellence in case management	Goal 4: Create collaborative interagency fund development
-Develop data sharing protocols through PCCI project between homeless providers and Parkland -Develop a FUSE model with Dallas County Jail and providers -Create multidisciplinary case staffing committees to identify high system utilizers and develop engagement strategies	-Create multidisciplinary Outreach Taskforce to plan strategies -Expand dedicated unsheltered outreach services connected to services and housing	-Create a Case Manager of the Year recognition -Create regular networking opportunities for peer to peer sharing among case managers -Develop Case Manager Boot Camp Training	-Create development officers/grant writers collaborative -Develop collaborative projects 'wish list' with summary and abstracts -Monitor funding opportunities and grant alerts

OBJECTIVE 6: Improve Information & Knowledge on Homelessness

Goal 1: Develop plan for a single HMIS system	Goal 2: Improve HMIS Data Collection Quality	Goal 3: Prepare CoC data resources to conduct the NAEH Homeless System Cost Evaluation Survey Report	Goal 4: Expand the Knowledge and Awareness of Homelessness
-Identify collaboration with the PCCI/PIECES/PLEXUS/IRIS Project -Secure Project Manager -Conduct Agency User Survey on IT, data collection and data use needs -Establish common data sharing standards across the CoC	-Expand on-site MDHA HMIS Staff agency training -Associate HMIS User Fees with Data Quality	-Secure participation among service providers -Establish regional unit costs of supportive housing, supportive services -Standardize reporting on costs and needs of direct care -Assess public costs of homelessness (ER, Jail, EMS)	-Seek expanded opportunities for dialogue with faith-based community -Develop web-based SOHA and Quarterly updates -Conduct eviction rate study from JP records